

Petitioner's Name: _____
Address: _____
City, State, Zip Code: _____
Telephone Number: _____
Attorney's Bar Number (if applicable): _____
Representing ☐ Self or ☐ Attorney for _____

**SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY**

In the Matter of (check one or both)
☐ Guardianship ☐ Conservatorship of

Case Number PB: _____

A Minor

**RECEIPT OF RESTRICTED FUNDS
BY A FORMER MINOR**

Notice to Conservator: Mail this signed and notarized receipt to Probate Court Administration within 30 days from the date of the Court Order releasing funds. Also mail this form to all parties who have appeared in the case, and to the former minor.

I acknowledge that the funds in my restricted account(s) have been released in accordance with the Order of the Court releasing the funds.

I have received all the funds held in the conservatorship to which I am entitled, as follows:

- A. Amount received: \$ _____
B. Date received: \$ _____
C. Name of financial institution that held the funds: _____

Signature of Former Minor

STATE OF ARIZONA)
COUNTY OF MARICOPA) ss.

The above receipt was signed before me this date: _____ by _____

My Commission Expires:

Notary Public